



**CITY OF ST CHARLES**  
**TWO EAST MAIN STREET**  
**ST. CHARLES, ILLINOIS 60174-1984**

Department: Building Zoning

Phone: (630) 377-4406 Fax: (630) 443-4638

**Attached Garage – Building Permit Guide**

1. A building permit is required prior to any construction of an attached garage.
2. An application is be filled out and submitted to the Building Department.
3. Two (2) sets of drawings showing the construction of the garage are to be submitted with the application.
4. Two (2) copies of the plat of survey showing the location of the garage and the measurements to all of the lot lines are to be submitted with the application.  
On the plat of survey, the location of the electric meter on the house is to be indicated. Also, we need drawn on the plat of survey how the electric comes into the building.
5. An attached garage setback is per the particular zoning of the lot.
6. The building permit fee for an attached garage is **\$135.00** and to be paid at time of submission of application and drawings. This fee is non-refundable.
7. It is the responsibility of the homeowner/contractor to arrange to have all underground utilities located. Attached for your information is a form giving you the companies and their telephone numbers for underground locations.
8. It is the responsibility of the homeowner/contractor to schedule with the Building Department the required inspections. When calling to schedule an inspection, please have the address and permit number.

Web Site <http://www.stcharlesil.org>

**J.U.L.I.E.**

Joint Utility Location Information for Excavators

**1-800-892-0123**

Dig Number: \_\_\_\_\_ Date Notified: \_\_\_\_\_

**Please Note: J.U.L.I.E. requires 48-hours notice before digging.**

One phone call to J.U.L.I.E. will notify all of the following public utilities. These service utilities need to be located and marked by utility representatives prior to starting any excavation, grading, or other work that is below the ground surface. You will receive a Dig Number, which you should record above along with the date of notification.

Utility	Color Code Marker
Electric Utilities	Red
Comcast	Orange
Northern Illinois Gas (NICOR)	Yellow
Sewer Utilities	Green
Telephone Utilities	Orange
Water Utilities	Blue

**BUILDING & ZONING DIVISION**  
**(630) 377-4406 OR (630) 377-4410**

Robert J. Vann  
**Building Commissioner**

Jerry Essem, Tom Medernach,  
**Building Inspector**

Steve Herra  
**Plumbing Inspector**

**DATE:**

**TO:**

**FROM:** St. Charles Building Zoning Department

**NOTICE:** The St. Charles Building Zoning Department has reviewed the plans, which were submitted:

**BY:**

**FOR:** Attached garage

**LOCATION:**

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**INSPECTIONS**

- (x ) Footing
- (x ) Floor
- (x ) Frame
- (x ) Rough electric
- (x ) Underground electric
- (x ) Final

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**REQUIRED CODES**

- (x ) St. Charles Municipal Code
- (x ) 2000 Int'l Residential Code w/revisions
- (x ) 2002 Nat'l Electrical Code w/revisions
- (x ) Fire Prevention Code

- **Re-inspection fees:** If any of the above-indicated inspections (with the exception of a final) require a re-inspection be conducted, a fee of \$60.00 for each re-inspection will be invoiced to the builder and/or owner. If the inspection is a final and requires a re-inspection, a fee of \$80.00 for each final re-inspection is to be paid at the Building and Zoning Office prior to the Final Occupancy being issued.

In review of your plans submitted to this office, the following items must be complied with per the above listed codes. **(Note: No Facility Shall Be Occupied Or Used Until A Final Inspection Has Been Made And A Certificate Of Occupancy Has Been Issued).**

1. Compliance with the above-indicated codes, ordinances, and inspections is required.
2. The plan review and stamped Field Copy of the plans are to be on the job site.
3. 24-hour notices is required for scheduling of any inspections.
4. All accessible electrical branch circuit outlets shall be GFI protected.
5. Any portion of the garage wall and/or ceiling that abuts habitable space shall have 5/8-fire code drywall and fire tape all seams.
6. An one-hour rated solid cord door with self-closing hinges shall be installed between the garage and dwelling space.
8. Footing/foundation has to be pinned to the existing foundation of the house.
9. Four (4") inch gas curbing is required in the garage.
10. It is the responsibility of the owner/contractor to provide all sub-contractors with copies of all review comments and the required inspections.



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**DEPARTMENT: BUILDING & ZONING**

**PHONE: (630) 377-4406**

**FAX (630) 443-4638**

**APPLICATION FOR CONSTRUCTION FOR BUILDING PERMITS**

**APPLICATION DATE: \_\_\_\_\_ PERMIT ISSUED \_\_\_\_\_ NO.: \_\_\_\_\_**

**PLEASE PRINT ALL INFORMATION**

**I, \_\_\_\_\_, do hereby apply for a permit for the following described  
work located at \_\_\_\_\_ Lot \_\_\_\_\_ Unit \_\_\_\_\_**

**NOTE: Is property located in the Historic Preservation District? Yes No**  
**Please circle either yes or no**

**Subdivision \_\_\_\_\_, Type of construction \_\_\_\_\_**

**Description of proposed work: \_\_\_\_\_**

**Square feet in building \_\_\_\_\_ Estimated cost of construction \_\_\_\_\_**

**Use of building \_\_\_\_\_ No. & Size of electric meter \_\_\_\_\_ No. & Size of water meters \_\_\_\_\_**

**Remarks \_\_\_\_\_**

**Plans \_\_\_\_\_ Specifications \_\_\_\_\_ Plat of Survey \_\_\_\_\_**

**Owner of Property**

**Name: \_\_\_\_\_**

**Address: \_\_\_\_\_**

**City: \_\_\_\_\_**

**State/Zip Code: \_\_\_\_\_**

**Phone: \_\_\_\_\_**

**General Contractor**

**Name: \_\_\_\_\_**

**Address: \_\_\_\_\_**

**City: \_\_\_\_\_**

**State/Zip Code: \_\_\_\_\_**

**Phone: \_\_\_\_\_**

**Electric Contractor**

**Name: \_\_\_\_\_**

**Address: \_\_\_\_\_**

**City: \_\_\_\_\_**

**State/Zip Code: \_\_\_\_\_**

**Phone: \_\_\_\_\_**

**Concrete Contractor**

**Name: \_\_\_\_\_**

**Address: \_\_\_\_\_**

**City: \_\_\_\_\_**

**State/Zip Code: \_\_\_\_\_**

**Phone: \_\_\_\_\_**

**Continued on reverse side**

PLEASE PRINT ALL INFORMATION

*Plumbing Contractors*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Illinois License No.: \_\_\_\_\_

Bond Amount: \$10,000.00

*Sewer & Water Contractor*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

*Roofing Contractors*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Illinois License No: \_\_\_\_\_

License Expiration Date: \_\_\_\_\_

*HVAC Contractor*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

I, the undersigned, certify that if a permit is issued to me, I will comply with all provisions of the building, plumbing, electric and other applicable ordinances of the City of St. Charles and shall perform all work, or cause all work to be performed according to the provisions of said ordinances. I, or my agent, shall personally supervise the work and shall do, or cause to have done, said work according to plans, specifications and other written information supplied as a part of this application. I am familiar with the applicable ordinances and the provision thereof and in signing this application do willingly become responsible for all work accomplished under the permit by all contractors, tradesmen and workmen, and shall call for inspections as required at a minimum of 24-hours before they become due.

PRINT NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

Name of actual business(s) that will occupy this space \_\_\_\_\_

\_\_\_\_\_

REPORT OF THE BUILDING OFFICIAL

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Accepted: \_\_\_\_\_ Rejected: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_

For Office Use

Received \_\_\_\_\_

Fee Paid \$ \_\_\_\_\_

Receipt # \_\_\_\_\_

Copies of application distributed to:

Electric: \_\_\_\_\_

Engineering: \_\_\_\_\_

Fire: \_\_\_\_\_

Meter: \_\_\_\_\_

PW: \_\_\_\_\_

Historic Preservation: \_\_\_\_\_